PTC/SB/47 (03-09)
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For the following listed application(s), please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with:	
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The attached Request for Customer Number (PTO/SB/125) form.	
PATENT NUMBER (if known)	APPLICATION NUMBER
	10/776,370
Completed by (check one):	
Applicant/Inventor	/Michael J. Swope/
_	Signature
Attorney or Agent of record 38,041	Michael J. Swope
(Reg. No.)	Typed or printed name
Assignee of record of the entire interest. See 37 CFR	3.71. (215) 568-3100
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)	Requester's telephone number
Assignee recorded at Reel Frame	October 26, 2011
	Date
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more that one signature is required, see below.	
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